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<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional)  Ahmed 5	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Assistant Commissioner for Patents Washington D.C. 20231" on _____		In re Application of  Walid Ahmed	
Signature _____  Typed or printed name _____		Application Number  09/379,675	Filed  August 24, 1999
		For <u>Distributed Dynamic Channel Allocation Technique for Multi-Carrier CDMA Cellular Systems with Mobile Base Stations</u>	
		Group Art Unit  2617	Examiner  Sheila B. Smith

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 500.00 (previously paid)

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ \_\_\_\_\_

☐ A check in the amount of the fee is enclosed

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account No. 50-0762. I have enclosed a duplicate copy of this sheet.

☒ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

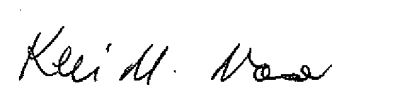
I am the

☐ applicant/inventor

☐ assignee of record of the entire interest  
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☒ attorney or agent of record

☐ attorney or agent acting under 37 CFR 1.34(a)  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

  
 \_\_\_\_\_  
 Signature

Kevin M. Mason  
 \_\_\_\_\_  
 Typed or printed name

March 29, 2007  
 \_\_\_\_\_  
 Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.